



FOREIGN EXCHANGE STUDENT TRANSFER

IDAHO HIGH SCHOOL ACTIVITIES ASSOCIATION
8011 Ustick Rd Boise ID 83704 Fax: 208-322-5505

Foreign exchange students participating in a foreign exchange program approved by C.S.I.E.T. may participate in interscholastic athletic competition provided (1) all other rules and regulations regarding eligibility have been met, (2) the Foreign Exchange Student Transfer form has been filed by the principal with the IHSAA, and (3) written permission to compete has been received from the IHSAA.

SCHOOL _____ CITY _____

STUDENT _____ Male/Female BIRTHDATE _____
(circle one) Mo. Day Year

Name of organization sponsoring student _____
(see foreign exchange student rule.) This form will not be processed if the above student is not participating in an approved foreign exchange program as listed under IHSAA rule 8-9-5.

Has student graduated from high school in his/her own country? _____

VISA Classification _____ (J-1) Other _____ (List) VISA Validity dates _____

How many years of secondary education were completed _____

Country and school from which transferring _____

Date student last attended school _____

Date student entered your school _____

Did student pass 5 subjects last semester? _____

Family with whom student will live _____

Relationship between host family and the high school or its athletic program _____

Address where student will reside _____

Local exchange program representative monitoring student _____

"I certify that I have reviewed and understand the Association's Foreign Exchange Student Transfer rules; that I have discussed those rules with the above student and with his/her parents; that I have investigated the information provided above and such additional information as I have deemed necessary; and that I believe that the student's transfer is not the result of recruiting or for any other reason in contravention of the Association's Transfer Rule or other applicable rule."

Signature _____
Principal or Authorized Administrator

Date _____

DO NOT WRITE IN THIS SPACE

(MUST HAVE STAMP TO BE OFFICIAL)

Approved by _____ Date _____

Restrictions (if applicable)

Eligible _____

Ineligible _____